

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF OREGON

LOGGED \_\_\_\_\_ REC'D CR  
PAID 34 DOCKETED \_\_\_\_\_

In re

Bliss Struks

Case No. 24-60412-tmr7  
☐ Amended

Debtor

**NOTICE OF DEBTOR'S AMENDMENT OF  
MAILING LIST OR SCHEDULES D, E/F, G,  
OR H**

**Notice**

The debtor has filed the attached amended mailing list or schedules.

If you are being added as a creditor to the mailing list or schedules and the deadlines to file a proof of claim or complaint under 11 U.S.C. § 523(c) or § 727 have passed, a discharge granted to the debtor may not discharge the debt owed to you.

If you are a creditor being deleted from the mailing list or schedules—

- You may not receive any further notices, and
- If this is a chapter 9 or 11 case, a proof of claim must be filed by the later of (a) 30 days from the service date of this notice or (b) the latest time fixed by the court.

You should contact your attorney with any questions.

**Filing Instructions for Debtor**

1. File this form to—

- add or delete creditors from the mailing list or Schedules D, E/F, G, or H;
- add addresses for creditors that were missing from the mailing list or Schedules D, E/F, G, or H filed with the petition; or
- change the amount or classification of a debt listed on Schedules D or E/F.

Payment of an amendment filing fee is required.

2. Adding or deleting creditors:

- If filing in paper, include a creditor mailing list with only the new or deleted creditors listed in the format required by Local Bankruptcy Form (LBF) 104. Be sure to label each set of changes with "Add" or "Delete."

- If e-filing via ECF, enter the names and addresses of creditors being added or deleted, and use the appropriate ECF event to amend schedules or mailing lists. But, if more than two are being deleted, include a creditor mailing list with only the deleted creditors listed in the format required by LBF 104 rather than entering the deleted creditors' names in the event.
3. If amending Schedules D, E/F, G, or H, label amended schedules as "Supplemental," include only the new information, and file them with this notice.
  4. Amending Schedules D or E/F:
    - Individual debtors must file the amended schedules with OF 106Sum.
    - Other debtors must file the amended schedules with OF 206Sum.
  5. If the case is closed, file a separate motion to reopen with the applicable filing fee.
  6. To file an address change for a previously listed creditor, use LBF 101C instead of this form.

#### **Service Instructions for Debtor**

7. When adding creditors, serve each new creditor with this notice, and a copy of any of the following documents that have already been filed in this case:
  - A. The notice of meeting of creditors (also called notice of bankruptcy case) that includes all 9 digits of any social security number (SSN) or individual taxpayer identification number (ITIN).
  - B. Each applicable amended schedule.
  - C. If this is a chapter 7 case, any order fixing time for filing a proof of claim.
  - D. If this is a chapter 9, 11, 12, or 13 case—
    - If the plan has not yet been confirmed, the notice of any pending confirmation hearing, all related documents sent with that notice and, in a chapter 13 case, the most recent proposed plan; or
    - If the plan has been confirmed, the most recent confirmation order and the most recent confirmed plan.
  - E. If this is a chapter 11, 12, or 13 case: any notice of modification of plan including attachments if the deadline for objection has not passed.
  - F. If this is a chapter 9 or 11 case—

- The names and addresses of the chairperson and any attorney for each official committee of creditors or equity security holders and
  - The notice of any pending hearing on a disclosure statement, with attachments.
8. When deleting creditors, changing a creditor status (for example, undisputed to disputed), or reducing a creditor's claim, serve each affected creditor with this notice and the applicable amended schedules.

### Certificate of Compliance

The undersigned debtor or debtor's attorney certifies that all applicable requirements above have been completed and the attachments are true and correct or were individually verified by the debtor.

03/5/2024  
Date

Bless T. Streeks  
Signature

Bless T. Streeks  
Type or Print Signer's Name and Phone No.

1805 garden ave, apt 36, Eugene OR 97403-(8631)  
Debtor's Address & Taxpayer ID#s (last 4 digits)

**Fill in this information to identify your case:**

Debtor 1	<u>BLISS</u>	<u>TAJZANE</u>	<u>STREEKS</u>
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
United States Bankruptcy Court for the: <b>DISTRICT OF OREGON</b>			
Case number	<u>6:2024BK60412</u>		
	<small>(If known)</small>		

☒ Check if this is an amended filing**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets****Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)
- 1a. Copy line 55, Total real estate, from *Schedule A/B* ..... \$ 0
- 1b. Copy line 62, Total personal property, from *Schedule A/B* ..... \$ 17,288.00
- 1c. Copy line 63, Total of all property on *Schedule A/B* ..... **\$ 17,288.00**

**Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)
- 2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D* ..... \$ 0.00
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)
- 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F* ..... \$ 0.00
- 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F* ..... + \$ 94,511.75
- Your total liabilities** **\$ 94,511.75**

**Part 3: Summarize Your Income and Expenses**

4. *Schedule I: Your Income* (Official Form 106I)
- Copy your combined monthly income from line 12 of *Schedule I* ..... \$ 2,794.00
5. *Schedule J: Your Expenses* (Official Form 106J)
- Copy your monthly expenses from line 22c of *Schedule J* ..... \$ 4,090.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No.
- ☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1,980.12

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 54,372.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 54,372.00

Fill in this information to identify your case:

Debtor 1 **BLISS** **TAJZANE** **STREEKS**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **6:2024BK60412**  
(If known)

☒ Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☒ No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Total claim	Priority amount	Nonpriority amount
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2.2

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

AFTERPAY

Nonpriority Creditor's Name

760 MARKET ST. FLOOR 2 UNIT 2.03

Number Street

SAN FRANCISCO

CA

94102

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 8631

When was the debt incurred? 11/13/21

Total claim

\$ 3,000.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify COLLECTION

4.2

AMAZON

Nonpriority Creditor's Name

AMAZON. P.O. BOX 81226

Number Street

SEATTLE

WA

98108-1226

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 8631

When was the debt incurred? 4/1/18

\$ 6,000.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify COLLECTION

4.3

CAP ONE

Nonpriority Creditor's Name

PO BOX 71083

Number Street

CHARLOTTE

NC

28272-1083

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 6682

When was the debt incurred? 10/1/21

\$ 1,296.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify CREDIT CARD

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

CAP ONE

Nonpriority Creditor's Name

PO BOX 71083

Number Street

CHARLOTTE

NC

28272-1083

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 3056

\$ 7,819.00

When was the debt incurred? 9/1/21

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CREDIT CARD

4.5

CONSUMER ADJUSTMENT

Nonpriority Creditor's Name

12855 TESSON FERRY SUITE

Number Street

SAINT LOUIS

MO

63128

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 7739

\$ 155.00

When was the debt incurred? 10/1/23

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION

4.6

CONSUMER ADJUSTMENT

Nonpriority Creditor's Name

12855 TESSON FERRY SUITE

Number Street

SAINT LOUIS

MO

63128

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5055

\$ 282.00

When was the debt incurred? 10/1/23

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION



**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

CAL STATE UNIVERSITY BAKERSFIELD

Nonpriority Creditor's Name

9001 STOCKDALE HIGHWAY

Number Street

BAKERSFIELD

CA

93311

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 8631

\$ 3,000.00

When was the debt incurred? 8/1/17

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION

4.8

CAMERON UNIVERSITY

Nonpriority Creditor's Name

2800 WEST GORE BOULEVARD

Number Street

LAWTON

OK

73505

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 8631

\$ 6,000.00

When was the debt incurred? 8/18/22

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION

4.9

DISCOVER

Nonpriority Creditor's Name

PO BOX 51908

Number Street

LOS ANGELES

CA

90051-6208

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 8520

\$ 2,004.00

When was the debt incurred? 3/1/21

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CREDIT CARD

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number

Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 385.00

When was the debt incurred? 5/1/19

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.11

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number

Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 484.00

When was the debt incurred? 6/1/18

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.12

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number

Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 2,309.00

When was the debt incurred? 10/1/17

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 2,524.00

When was the debt incurred? 3/1/15

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.14

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 2,781.00

When was the debt incurred? 8/1/19

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.15

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 2,784.00

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 2,784.00

When was the debt incurred? 5/1/19

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.17

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 3,213.00

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.18

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 3,362.00

When was the debt incurred? 10/1/17

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.19

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 3,629.00

When was the debt incurred? 8/1/19

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.20

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 3,694.00

When was the debt incurred? 9/1/15

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.21

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number	Street		
KNOXVILLE		TN	37930
City		State	ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number 0705

\$ 3,711.00

When was the debt incurred? 3/1/15

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.22

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 5,033.00

When was the debt incurred? 4/1/15

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.23

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 5,063.00

When was the debt incurred? 9/1/15

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

4.24

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008.

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 5,551.00

When was the debt incurred? 10/1/21

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.25

EDFIN/ESA

Nonpriority Creditor's Name

P.O. BOX 36008

Number Street

KNOXVILLE

TN

37930

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0705

\$ 7,065.00

When was the debt incurred? 10/1/21

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.26

FAIR COLLECTIONS &amp; OUTSOURCE

Nonpriority Creditor's Name

6931 ARLINGTON RD STE 400

Number Street

BETHESDA

MD

20814

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5173

\$ 5,620.00

When was the debt incurred? 12/1/20

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION

4.27

IBS COLLEGE OF BEAUTY

Nonpriority Creditor's Name

388 WEST 7TH AVENUE

Number Street

EUGENE

OR

97401

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 8631

\$ 2,168.75

When was the debt incurred? 5/1/23

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify COLLECTION

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.28

LENDUP

Nonpriority Creditor's Name

1750 BROADWAY

Number Street

OAKLAND

CA

94612

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 9863

\$ 100.00

When was the debt incurred? 6/1/17

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify LOAN

4.29

LVNVFUNDG

Nonpriority Creditor's Name

PO BOX 10584

Number Street

GREENVILLE

SC

29603

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 7881

\$ 992.00

When was the debt incurred? 12/1/22

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify OTHER

4.30

SEZZLEINC

Nonpriority Creditor's Name

700 NICOLLET MALL

Number Street

MINNEAPOLIS

MN

55402

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 7129

\$ 503.00

When was the debt incurred? 9/1/21

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify PAY OVER TIME LOAN



**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.31

WFFNATBANK

Nonpriority Creditor's Name

420 MONTGOMERY STREET

Number Street

SAN FRANCISCO

CA

94104

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 3870\$ 1,200.00When was the debt incurred? 5/1/08

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify NEGATIVE BALANCE FROM B/

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify \_\_\_\_\_

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
<b>Total claims from Part 1</b>	
6a. Domestic support obligations	6a. \$ 0.00
6b. Taxes and certain other debts you owe the government	6b. \$ 0.00
6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ 0.00
6e. Total. Add lines 6a through 6d.	6e. \$ 0.00

	Total claim
<b>Total claims from Part 2</b>	
6f. Student loans	6f. \$ 54,372.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 40,139.75
6j. Total. Add lines 6f through 6i.	6j. \$ 94,511.75

Fill in this information to identify your case:

Debtor 1	<b>BLISS</b>	<b>TAJZANE</b>	<b>STREEKS</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>DISTRICT OF OREGON</b>			
Case number (If known)	<b>6:2024BK60412</b>		

☒ Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.

☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? CA. Fill in the name and current address of that person.

DREW LAZOS

Name of your spouse, former spouse, or legal equivalent

1760 CHEATHAM AVENUE

Number Street

BAKERSFIELD

CA

93307

City

State

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.2

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.3

Name

Number Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<u>BLISS</u>	<u>TAJZANE</u>	<u>STREEKS</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF OREGON</u>			
Case number (If known)	<u>6:2024BK60412</u>		

☒ Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x [Signature] x

Signature of Debtor 1

Signature of Debtor 2

Date 3/5/2024  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

IN THE UNITED STATES BANKRUPTCY COURT FOR THE  
DISTRICT OF OREGON

IN RE:

BLISS TAJZANE STREEKS  
Debtor.


)  
)  
) Case No. 6:2024BK60412  
)

) Chapter 7  
)

**VERIFICATION OF MATRIX**

The above named debtor hereby verifies that the attached List of Creditors is true and correct to the best of his/her/their knowledge.

Date: 3/9/2024

  
Debtor Signature

add

AFTERPAY

760 MARKET ST. FLOOR 2 UNIT 2.03

SAN FRANCISCO , CA 94102

add

AMAZON

AMAZON. P.O. BOX 81226

SEATTLE, WA 98108-1226

add

CAL STATE UNIVERSITY BAKERSFIELD

9001 STOCKDALE HIGHWAY

BAKERSFIELD, CA 93311

add

CAMERON UNIVERSITY

2800 WEST GORE BOULEVARD

LAWTON, OK 73505

CAP ONE

PO BOX 71083

CHARLOTTE, NC 28272-1083

CONSUMER ADJUSTMENT

12855 TESSON FERRY SUITE

SAINT LOUIS, MO 63128

DISCOVER  
PO BOX 51908  
LOS ANGELES, CA 90051-6208

EDFIN/ESA  
P.O. BOX 36008  
KNOXVILLE, TN 37930

FAIR COLLECTIONS & OUTSOURCE  
6931 ARLINGTON RD STE 400  
BETHESDA, MD 20814

*add*  
IBS COLLEGE OF BEAUTY  
388 WEST 7TH AVENUE  
EUGENE, OR 97401

*add*  
LENDUP  
1750 BROADWAY  
OAKLAND, CA 94612

*add*  
LVNVFUNDG  
PO BOX 10584  
GREENVILLE, SC 29603

add

SEZZLEINC

700 NICOLLET MALL

MINNEAPOLIS, MN 55402

T-MOBILE

3625 132ND AVENUE SOUTHEAST

BELLEVUE, WA 98006

WFFNATBANK

420 MONTGOMERY STREET

SAN FRANCISCO, CA 94104